ACCREDITATION NEWSLETTER

March 2017

MARSHALL

COLLEGE OF EDUCATION
AND PROFESSIONAL DEVELOPMENT

CAEP — Council for the Accreditation of Educator Preparation

Message from the Dean

It is hard to believe March is here, flowers are blooming and we are another month closer to CAEP 2018. It was exciting to hear back from our fall SPA submissions. **Congratulations to the Early Childhood Education (undergraduate) and the Literacy faculty for Reading Specialist submissions that came back fully recognized!**

We have several program reports that have been provided to the AACC for another look, and we are looking forward to having a number of submissions ready for the March 15 deadline. Please remember, **if you have a SPA to submit, it should have come to the AACC by March 1. If we haven't received it yet, please get it to us as soon as possible so it will be ready for submission.** Thank you to so many people who have put in many, many hours of work to get us to this point.

Another big thank you to our diversity presenters. Kudos to all who attended this valuable session as well as the previous one. Your feedback is very valuable.

As we continue to work on the many aspects of accreditation, let's not lose sight of the real aim – to **continually improve our programs**. So as we are working on the reports and evidence for our upcoming institutional report, we are also looking at what we are doing (and what we are not doing), and hopefully improving our approach to assessment overall. You have heard the phrases "culture of compliance" and "culture of evidence" a number of times. You have also had an opportunity to examine and discuss the Selected Improvement Plan (see the update later in the newsletter). Our next step in this process is to establish a group of faculty to focus on the changes needed in the COEPD. **The Quality of Evidence Work Group (QEWG)** will have the primary purpose of facilitating, supporting, and monitoring the transition within the COEPD from a culture of compliance to a culture of evidence. This group will be charged with ensuring the availability/access and improving the quality of the evidence available to support continuous improvement within the COEPD. The QEWG will also be responsible for the planning, implementation, and evaluation of the Selected Improvement Plan (SIP) and reviewing this plan over time. The QEWG will be co-directed by the two Assessment Coordinators who will report directly to the Dean in these roles. The SPA coordinator will be a member of the workgroup, and the two Associate Deans will serve as ex-officio members. **Four faculty members (two representing initial programs and two representing advanced programs) will also be appointed by the dean. Program directors are asked to provide recommendations, but interested faculty are also encouraged to contact me.**

Be sure our next faculty workshop is on your calendar. The topic is one of our cross-cutting themes, technology. **March 10, 10 am in GC 134 in South Charleston, and JH 235 in Huntington via Zoom. See you there!**

CAEP information on the Web

The COEPD recently unveiled a new web page devoted to information on CAEP accreditation. This can be found under the Faculty tab on the COEPD web site, or directly at: http://www.marshall.edu/coepd/faculty/caep-resource-page/

The page contains general information about the CAEP accreditation process and standards for both initial and advance programs, as well as a library of presentations on a variety of topics related to assessment. Past faculty professional development seminars relating to CAEP have been placed on the site as well. For more information, contact Dr. George Watson, Watson@marshall.edu.

Update: The COEPD Selected Improvement Plan (SIP) *By Ron Childress*

One of the required components of the new CAEP accrediting process is the development and implementation of a Selected Improvement Plan (SIP). Each institution, or Educator Preparation Provider (EPP), must identify a standard or in several components across more than one standard, as an area for improvement. The goal of the SIP is for the EPP to achieve a higher level of excellence in a selected standard(s) than is normally required.

We must provide a rationale for selecting the focal area, present its current level of performance as baseline data, and set goals with measurable yearly objectives to show data-driven improvements over time. The emphasis of the plan must be on the collection and analysis of data and interventions that demonstrate substantive improvements.

We are required to report progress on the SIP annually and our progress will be evaluated during the subsequent accreditation visit **(anticipated to be in October 2018)** to determine if Components 5.3 and 5.4 of Standard 5 are satisfied. **A provider's performance under Component 5.3 must be satisfied in order to receive full accreditation.** The CAEP Standards also state throughout that candidates and completers must demonstrate a positive impact on student learning. In this way, any SIP should provide a direct link to improving program impact as described in Standard 4.

Focus of COEPD's SIP

The focus of the COEPD's SIP is **Improving the Quality of the Evidence Available to Support Continuous Improvement.** An initial assessment by the Assessment and Accreditation Coordinating Council (AACC) of the COEPD's function and capacity to ensure that quality evidence is available to support continuous improvement (CI) efforts concluded there was **no systematic plan for doing so.** Additionally, the AACC determined there was **little organizational and personnel capacity for ensuring evidence quality.** Given these factors, the AACC recommended to Dean Eagle that **Improving the Quality of Evidence Available to Support Continuous Improvement** be the focus of our SIP. The Dean concurred and the COEPD Cabinet and Program Directors supported the focus.

Purpose/Goals

The purpose of the COEPD Selected Improvement Plan is to transition from **a culture of compliance to a culture of evidence.** The expected outcomes resulting from this transition include:

⇒ **Improvements in the quality of evidence available to support decision making for continuous improvement;**
⇒ **An organizational structure to support the provision of quality evidence; and,**
⇒ **Enhanced faculty and staff capacity to implement evidence based decision making,**
⇒ Five goals have been developed to provide direction for this effort:
⇒ **Leadership and Personnel**: Develop a leadership/personnel environment and structure that supports and encourages the transition to a "culture of evidence".
⇒ **Training and Support:** Develop faculty and staff capacity (knowledge and skills) needed to support the transition to a "culture of evidence".
⇒ **Collaboration and Networking**: Develop and actively support networking and collaborative arrangements that support the development and maintenance of a "culture of evidence".
⇒ **Organizational Support**: Develop &maintain an organizational structure necessary to support a "culture of evidence".
⇒ **Recognition, Rewards, and Incentives**: Develop and implement a recognition, rewards, and incentive system for supporting the development and maintenance of a "culture of evidence".

In an effort to begin developing a plan for achieving these goals, SIP faculty workshops were held in Hgtn. and SC on Jan. 20th. The workshops were focused on the SIP concept and a review of possible strategies for achieving the aforementioned goals. One aspect of the sessions was the solicitation of feedback regarding the relative importance of a list of possible implementation strategies. Some 40 faculty members participated in the workshops and 37 responded to a survey in which they were asked to rate the effectiveness of a list of possible strategies for facilitating our transition from a **Culture of Compliance** to a **Culture of Evidence** and **Improving the Quality of Evidence Available to Support Continuous Improvement**.

Strategies scoring a "Strongly Agree" rating from more than 60% of the respondents included:
1. Develop and communicate clear goals regarding developing a Culture of Evidence (74.3%).
2. Provide technical support and easy access to data (69.7%).
3. Provide/allocate adequate resources (81.3%).
4. Engage key stakeholders early and often (63.6%).
5. Provide training (webinars, seminars, data retreats, etc.) (68.8%).
6. Support and encourage conference and workshop participation (65.5%).
7. Develop and provide integrated data systems (63.6%).

A complete report of the survey results is available on the COEPD website. The results of this survey will inform the continuing development of the SIP.

CAEP Standard 2 (Advanced Programs):
What is it and what do we need to do about it? *By Tina Allen*

In continuing our look at the five CAEP standards and how they affect us, this article focuses on *Advanced Program Standard 2, Clinical Experiences*. Much of this information is taken from a CAEP webinar available on YouTube at https://youtu.be/AEtW-ccJC30.

Standard A.2 states: ***The provider ensures that effective partnerships and high-quality clinical practice are central to preparation so that candidates develop the knowledge, skills, and professional dispositions appropriate for their professional specialty field.*** For advanced programs, the standard has two components: 1) *effective partnerships*, partnerships that are mutually beneficial and accountable and where partners share responsibility for the candidate outcome, and 2) *high quality clinical practice*, a sequence of experiences where partners co-establish criteria for performance and retention, and all candidates have opportunities to practice applications of content knowledge and skills emphasized in their coursework.

CAEP expects that all educator preparation providers (EPPs) have strong collaborative partnerships with school districts and individual school partners, as well as other community stakeholders. CAEP (http://caepnet.org/standards/standard-2) defines a partnership as **"Mutually beneficial agreement among various partners in which all participating members engage in and contribute to goals for the preparation of education professionals. This may include examples such as pipeline initiatives, Professional Development Schools, and partner networks."** In order to meet Standard 2, clinical experiences must be a shared endeavor with a focus on the improvement of student learning and development. Partners must work together to determine expectations of program development, implementation, assessment, and continuous improvement. At a minimum, the district and/or school leadership and the EPP should be a part of the partnership, but other partners, such as business and community members, might also be included.

High-quality clinical experiences should be early, ongoing and will most often take place in a variety of school- and community-based settings, although experiences can also take place through simulations and other virtual opportunities. It is expected that the experiences integrate applications of theory from coursework where candidates have multiple opportunities to develop, practice, demonstrate, and reflect upon clinical and academic components of preparation. It is important to document that ALL candidates have clinical experiences. Evidence must also be provided to show that candidates have used technology appropriate to their specialization.

In thinking about your specific program, ask yourself "What evidence do I have that would demonstrate mutually beneficial and accountable partnerships in which decision making is shared?" Examples of possible types of evidence include: Memoranda of Understanding (MOUs), common expectations developed by partners and EPPs, a history of collaboratively designed observation/evaluation tools, a specific section on partnerships in your field experience/clinical practice handbooks, schedule of and agendas for joint meetings between partners, alignment of coursework with field experiences where candidates observe and implement effective strategies linked to coursework.

Because many of our advanced programs are online, many of you may be wondering how you will demonstrate partnerships for online programs where students do not complete clinical experiences locally. Although these partnerships may not be the same level of partnership as a local partner, you should be able to talk about ways you work with those sites for placement and how you get feedback from those sites. For example, you might include representatives from those sites in advisory groups by Skyping them in or by provide online opportunities for training of supervisors.

Quality Assurance Systems   By Chuck Bethel

I am sure that for most of us, when we hear the words, "Quality Assurance System," think of something like this image. We roll our eyes, yawn and look for the comic section of the paper! :) But it doesn't have to be that way. I will attempt to explain what the Quality Assurance System (QAS) is as defined by CAEP, and the basic format for the QAS that has been established by the COEPD. In its simplest form, the CAEP Quality Assurance System is designed with two things in mind:

- The provider's quality assurance system is comprised of multiple measures that can monitor candidate progress, completer achievements, and provider operational effectiveness. (5.1)
- The provider's quality assurance system relies on relevant, verifiable, representative, cumulative and actionable measures, and produces empirical evidence that interpretations of data are valid and consistent. (5.2)

How is a Quality Assurance System going to accomplish this? Through three very specific goals:

1. The provider regularly & systematically assesses performance against its goals & relevant standards, tracks results over time, tests innovations and the effects of selection criteria on subsequent progress and completion, and uses results to improve program elements and processes. (5.3
2. Measures of completer impact, including available outcome data on P-12 student growth, are summarized, externally benchmarked, analyzed, shared widely, and acted upon in decision-making related to programs, resource allocation, and future direction. (5.4)
3. The provider assures that appropriate stakeholders, including alumni, employers, practitioners, school and community partners, and others defined by the provider, are involved in program evaluation, improvement, and identification of models of excellence. (5.5)

So, how is this supposed to look at COEPD? The following is the way the QAS was set up back in 2012. At that time, several criteria were identified to guide the development and implementation of the QAS. As you review these criteria, ask yourself these questions:

"Am I engaged in quality assessment in my classes?"
"Is my program engaged in quality assessment at this level?"
"Is the COEPD engaged in quality assessment at this level?"

System components include:

1. Systematic and coherent with multiple decision points;
2. Integrated with other existing evaluation/assessment requirements;
3. Comprehensive and reflect the Conceptual Framework;
4. Flexible;
5. Include assessments that are aligned with applicable knowledge and skill standards;
6. Participatory in development and implementation
7. Based on data from multiple sources that are based on carefully selected evaluation criteria;
8. Developed from simple to complex;
9. Committed to fairness, accuracy, consistency, and the avoidance of bias;
10. Inclusive through stakeholder (content faculty, professional education faculty, P-12 faculty and administrators, candidates, and graduates/alumni) involvement in system development and management;
11. Continuously supported and managed; and
12. Formally reviewed and revised as needed on a regular basis.

Quality Assurance Systems, Continued

The definition of assessment adopted by COEPD in 2012 includes three major processes: data collection from a comprehensive and integrated set of assessments, analysis of data for forming judgments, and use of analysis in making decisions. Based on these three processes, assessment is operationally defined as a process in which data/information are collected, summarized, and analyzed as a basis for forming judgments. Judgments then form the basis for making decisions regarding continuous improvement of our programs.

This QAS evolved through a process of systematic thought and work focused on assessing education candidates and their programs. Assessment of candidates and programs align unit requirements with institutional, state, and national standards and leads to measured decision making involving candidates, programs, and faculty. COEPD assessment instruments have been developed, used, and refined with feedback from both public school and university supervisors. Rubrics supply indicators that show what is to be measured by the standards. Seminars are held with university and public school supervisors to review the use of the instruments and to review definitions for terminology. Continuous review and revision of the instruments occurs as data are aggregated. Primary sources for this review and revision are faculty members, the Undergraduate Program Curriculum Committee, the Graduate Program Committee, and the Education Personnel Preparation Advisory Committee.

The intention was that this developmental approach to the QAS would create a connected, expanded system that encompasses all assessments that are required at COEPD. This approach would allow collected data to be viewed by various parties as input gathered for judgments and decisions regarding how educational personnel are prepared at Marshall University. Thus, various studies for organizations such as CAEP, specialized professional associations (SPAs), Marshall University, and other agencies are part of the Quality Assurance System, and the data are collected in a systematic, purposeful manner.

In summary, the overall CAEP definition of a Quality Assurance System is laid out in its **5th Standard: Provider Quality, Continuous Improvement, and Capacity.**

> **The provider maintains a quality assurance system comprised of valid data from multiple measures, including evidence of candidates' and completers' positive impact on P-12 student learning and development. The provider supports continuous improvement that is sustained and evidence-based, and that evaluates the effectiveness of its completers. The provider uses the results of inquiry and data collection to establish priorities, enhance program elements and capacity, and test innovations to improve completers' impact on P-12 student learning and development.**

Wow! How did you answer the questions above? Let's be honest, to some degree we would probably need to answer all three with a "No." Maybe the question you are really asking is, *"Is all this really possible?"* Yes! I believe it is. It really is not as complicated as that image at the beginning of this article. We do have a Quality Assurance Plan, I am just afraid we aren't following it very well. It can happen, but it will take effort from all of us! We must all invest the time and energy to make it not just happen, but become a priority now, and in the days to come. After all, this is the best way to make all of our classes, programs and our college better, and that is the ultimate goal of any Quality Assurance System.

Calendar of Events for Spring 2017

⇒ **Faculty workshops:**

  ⇒ Fridays

   ⇒ March 10, 2017—Topic: Technology

     ⇒ MUGC 134 and JH 235 via Zoom

     ⇒ 10 AM for both campuses

   ⇒ April 14, 2017

     ⇒ 10 AM—SC, 1 PM—H

⇒ **AACC Meetings:**

  ⇒ First & third Wednesday, monthly, from 9 am—Noon

  ⇒ March 8 & 29, April 12 & 26, May 10 & 24

⇒ **Submission of Key Assessments and Rubrics:**

  ⇒ As Soon As Possible but no later than April 1.

Assessment and Accreditation Coordinating Council (AACC) Members include Drs. Chuck Bethel, Ron Childress, Teresa Eagle, Sissy Isaacs, Paula Lucas, Sandra Stroebel and George Watson.